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|   |  |                        |                   |
|---|--|------------------------|-------------------|
| <b>DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)</b> |  | Attorney Docket Number | PU4868USw         |
|   |  | First Named Inventor   | Michael John RENO |
| <b>COMPLETE IF KNOWN</b>  |  |                        |                   |
|   |  | Application Number     |                   |
|   |  | Filing Date            |                   |
|   |  | Art Unit               |                   |
|   |  | Examiner Name          |                   |

**I hereby declare that:**

Each inventor's residence, mailing address, and citizenship are as stated below next to their name.

I believe the inventor(s) named below to be the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

**CHEMICAL COMPOUNDS***(Title of the Invention)*

the specification of which

 is attached hereto

OR

 was filed on **(08/11/2004 )** as United States Application Number or PCT InternationalApplication Number **PCT/US2004/026251** and was amended on **(MM/DD/YYYY)** *(if applicable)*.

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

| Prior Foreign Application Number(s) | Country | Foreign Filing Date (MM/DD/YYYY) | Priority Not Claimed     | Certified Copy Attached? YES | Certified Copy Attached? NO |
|-------------------------------------|---------|----------------------------------|--------------------------|------------------------------|-----------------------------|
|                                     |         |                                  | <input type="checkbox"/> | <input type="checkbox"/>     | <input type="checkbox"/>    |
|                                     |         |                                  | <input type="checkbox"/> | <input type="checkbox"/>     | <input type="checkbox"/>    |
|                                     |         |                                  | <input type="checkbox"/> | <input type="checkbox"/>     | <input type="checkbox"/>    |
|                                     |         |                                  | <input type="checkbox"/> | <input type="checkbox"/>     | <input type="checkbox"/>    |

 Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02/B attached hereto:

[Page 1 of 2]

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## DECLARATION – Utility or Design Patent Application

Direct all correspondence to:  Customer Number 23347      OR  Correspondence address below

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_

State \_\_\_\_\_

ZIP \_\_\_\_\_

Country \_\_\_\_\_

Telephone \_\_\_\_\_

Fax \_\_\_\_\_

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

**NAME OF SOLE OR FIRST INVENTOR:**  A petition has been filed for this unsigned inventor

Given Name  
(first and middle [if any])

Family Name  
Or Surname

Michael, John

RENO

Inventor's  
Signature

Date

1/25/06

Residence: City

State

Country

Citizenship

Durham

NC

US

US

Mailing Address

**c/o GlaxoSmithKline, Five Moore Drive, PO Box 13398**

|      |       |     |         |
|------|-------|-----|---------|
| City | State | ZIP | Country |
|------|-------|-----|---------|

Research Triangle Park

NC

27709

US

**NAME OF SECOND INVENTOR:**  A petition has been filed for this unsigned inventor

Given Name  
(first and middle [if any])

Family Name  
Or Surname

Kirk, Lawrence

STEVENS

Inventor's  
Signature

Date

Residence: City

State

Country

Citizenship

Durham

NC

US

US

Mailing Address

**c/o GlaxoSmithKline, Five Moore Drive, PO Box 13398**

|      |       |     |         |
|------|-------|-----|---------|
| City | State | ZIP | Country |
|------|-------|-----|---------|

Research Triangle Park

NC

27709

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| <b>DECLARATION</b>   |   | <b>ADDITIONAL INVENTOR(S)<br/>Supplemental Sheet<br/>Page 3 of 3</b> |                          |
|--|---|--|--------------------------|
| <b>Name of Additional Joint Inventor, if any:</b>                          | <input type="checkbox"/> A petition has been filed for this unsigned inventor |  |                          |
| Given Name (first and middle [if any])                                     |   | Family Name or Surname   |                          |
| <b>Alex, Gregory</b>   |   | <b>WATERSON</b>  |                          |
| <b>Inventor's<br/>Signature x</b>  |   |  | Date <b>x</b>            |
| Residence: City<br><b>Durham</b>   | State<br><b>NC</b>  | Country<br><b>US</b>   | Citizenship<br><b>US</b> |
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| <b>Yuemei</b>  |   | <b>ZHANG</b>   |                          |
| <b>Inventor's<br/>Signature</b>  |   |  | Date                     |
| Residence: City<br><b>Montgomery</b>                                       | State<br><b>NJ</b>  | Country<br><b>US</b>   | Citizenship<br><b>US</b> |
| <b>Mailing Address c/o GlaxoSmithKline, Five Moore Drive, PO Box 13398</b> |   |  |                          |
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Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_

State \_\_\_\_\_

ZIP \_\_\_\_\_

Country \_\_\_\_\_

Telephone \_\_\_\_\_

Fax \_\_\_\_\_

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Given Name  
(first and middle [if any])

Family Name  
Or Surname

**Michael, John**

**RENO**

Inventor's  
Signature

Date

Residence: City

State

Country

Citizenship

**Durham**

**NC**

**US**

**US**

Mailing Address

**c/o GlaxoSmithKline, Five Moore Drive, PO Box 13398**

City

State

ZIP

Country

**Research Triangle Park**

**NC**

**27709**

**US**

**NAME OF SECOND INVENTOR:**

A petition has been filed for this unsigned inventor

Given Name  
(first and middle [if any])

Family Name  
Or Surname

**Kirk, Lawrence**

**STEVENS**

Inventor's  
Signature

*Kirk L Stevens*

Date

*✓ 1/24/06*

Residence: City

State

Country

Citizenship

**Durham**

**NC**

**US**

**US**

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| Inventor's Signature x   |   |  |                          |
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| Yuemei   |   | ZHANG  |                          |
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A petition has been filed for this

**Michael, John** RENO

Inventor's Signature \_\_\_\_\_ Date \_\_\_\_\_

| Residence: City | State | Country | Citizenship |
|-----------------|-------|---------|-------------|
| Durham          | NC    | US      | US          |

### **Mailing Address**

**C/O GlaxoSmithKline, Five Moore Drive, PO Box 15598**

|                               |           |              |           |
|-------------------------------|-----------|--------------|-----------|
| City                          | State     | ZIP          | Country   |
| <b>Research Triangle Park</b> | <b>NC</b> | <b>27709</b> | <b>US</b> |

**NAME OF SECOND INVENTOR:**  A petition has been filed for this unsigned inventor.

A petition has been filed for this

Kirk, Lawrence STEVENS

Inventor's Signature \_\_\_\_\_ Date \_\_\_\_\_

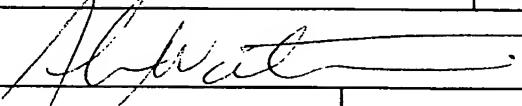
| Residence: City | State | Country | Citizenship |
|-----------------|-------|---------|-------------|
| Durham          | NC    | US      | US          |

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c/o GlaxoSmithKline Five Moore Drive PO Box 13398

**City** \_\_\_\_\_ **State** \_\_\_\_\_ **ZIP** \_\_\_\_\_ **Country** \_\_\_\_\_

**Research Triangle Park**      NC      27709      US

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| <input type="checkbox"/> Declaration Submitted with Initial Filing        | <input type="checkbox"/> Declaration Submitted after Initial Filing (surcharge) (37 CFR 1.16 (e)) required | First Named Inventor   | Michael John RENO |
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Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02/B attached hereto:

[Page 1 of 2]

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**DECLARATION – Utility or Design Patent Application**Direct all correspondence to:  Customer Number **23347** OR  Correspondence address below

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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR:  A petition has been filed for this unsigned inventorGiven Name  
(first and middle [if any])Family Name  
Or Surname**Michael, John****RENO**Inventor's  
Signature

Date

Residence: City

State

Country

Citizenship

**Durham****NC****US****US**

Mailing Address

**c/o GlaxoSmithKline, Five Moore Drive, PO Box 13398**City State ZIP Country  
**Research Triangle Park** **NC** **27709** **US**NAME OF SECOND INVENTOR:  A petition has been filed for this unsigned inventorGiven Name  
(first and middle [if any])Family Name  
Or Surname**Kirk, Lawrence****STEVENS**Inventor's  
Signature

Date

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**Research Triangle Park** **NC** **27709** **US** Additional inventors are being named on the supplemental Additional Inventor(s) sheet(s) PTO/SB/02S or 02LR attached hereto

| <b>DECLARATION</b>   |   | <b>ADDITIONAL INVENTOR(S)</b><br>Supplemental Sheet<br>Page 3 of 3 |                          |
|--|---|--|--------------------------|
| Name of Additional Joint Inventor, if any:                                 | <input type="checkbox"/> A petition has been filed for this unsigned inventor |  |                          |
| Given Name (first and middle [if any])                                     |   | Family Name or Surname   |                          |
| Alex, Gregory  |   | WATERSON   |                          |
| Inventor's Signature x   |   |  | Date x                   |
| Residence: City<br><b>Durham</b>   | State<br><b>NC</b>  | Country<br><b>US</b>   | Citizenship<br><b>US</b> |
| Mailing Address <b>c/o GlaxoSmithKline, Five Moore Drive, PO Box 13398</b> |   |  |                          |
| City<br><b>Research Triangle Park</b>                                      | State<br><b>NC</b>  | ZIP<br><b>27709</b>  | Country<br><b>US</b>     |
| Name of Additional Joint Inventor, if any:                                 | <input type="checkbox"/> A petition has been filed for this unsigned inventor |  |                          |
| Given Name (first and middle [if any])                                     |   | Family Name or Surname   |                          |
| Yuemei   |   | ZHANG  |                          |
| Inventor's Signature<br>   |   |  | Date <b>1/25/2006</b>    |
| Residence: City<br><b>Montgomery</b>                                       | State<br><b>NJ</b>  | Country<br><b>US</b>   | Citizenship<br><b>US</b> |
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| Name of Additional Joint Inventor, if any:                                 | <input type="checkbox"/> A petition has been filed for this unsigned inventor |  |                          |
| Given Name (first and middle [if any])                                     |   | Family Name or Surname   |                          |
|  |   |  |                          |
| Inventor's Signature   |   |  | Date                     |
| Residence: City  | State   | Country  | Citizenship              |
| Mailing Address  |   |  |                          |
| City   | State   | Zip  | Country                  |